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ANNUAL REPORT
OF THE
DEPARTMENT OF PUBLIC WELFARE



TO THE
GOVERNOR OF MONTANA
HONORABLE FORREST H. ANDERSON

FOR THE
FISCAL YEAR ENDED
JUNE 30, 1970

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The Big Sky Country



FORREST H. ANDERSON
Governor

THEODORE CARKULIS,
Administrator

STATE OF MONTANA
DEPARTMENT OF PUBLIC WELFARE
P. O. Box 1723
Helena, Montana 59601

August 31, 1970

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The Honorable Forrest H. Anderson
Governor
State of Montana
Helena, Montana 59601

Dear Governor Anderson:

In accordance with the requirements of Section 82-4002, R.C.M. 1947, there is herewith transmitted to you the report of the Department of Public Welfare covering the fiscal year ended June 30, 1970.

During the reported year the department has strived to improve its identity as a people-oriented, service-focused agency. We have increased the standards of assistance by the establishment of a special allowance for winter needs which is intended to help people during the time of year when they need it the most. The food stamp and commodity distribution programs have been expanded to state-wide coverage. We have improved our cooperation and participation with other agencies in activities of mutual interest.

Increasing caseloads, particularly in the Aid to Dependent Children and Aid to the Permanently and Totally Disabled programs, and increasing medical costs provide the principal reasons for concern. These increases are apparent not only in Montana but also in most states of the country. Also of concern is the continuing increase in the cost of living which causes particular hardship among low-income people. We are anticipating additional federal assistance in funding welfare programs, but in the meantime, the burden must be borne by state and county funds.

The proposed welfare "reform" system, if enacted, will necessitate substantial changes in programs and administration and will probably require a considerable amount of enabling legislation. We are keeping informed of developments and will begin to make recommendations and develop legislative proposals when the national picture becomes clearer.

Respectfully submitted,

MONTANA DEPARTMENT OF PUBLIC WELFARE

Theodore Carkulis

Theodore Carkulis, Administrator



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PRINCIPAL OFFICES AND OFFICERS

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Joseph H. Roe.....Director of Social Services
Jack R. Carlson.....Director of Medical Assistance
William J. Welsh.....Director of Field Operations
Edward J. Malensek.....Director of Staff Development
Thomas L. Connors.....Director of Finance
Emil A. Honka.....Director of Visual Services
Douglas Egan.....Director of Statistics and Research
Joseph Winfield.....Manager of General Services

PRINCIPAL OFFICE

Public Welfare Building, 515 North Ewing, Helena

LEGAL REFERENCES

GENERALLY

The statutes relating to the operation of the Department of Public Welfare are for the most part contained in the Public Welfare Act (Title 71, R.C.M. 1947 as amended). These provisions generally implement the programs under the following titles of the Federal Social Security Act: I, IV, X, XIV, XIX.

Operating policies and procedures necessary to administer statutory requirements are contained in the following manuals issued by the department which are available in all district offices and at all county welfare offices:

- Vol. II.....Social Services
- Vol. III.....Personnel Administration
- Vol. IV.....Public Assistance
- Vol. V.....Finance
- Vol. VI.....Statistics and Research
- Vol. VII.....Claims
- Vol. IX.....Medical Assistance

SPECIAL

Children and Child Welfare, Title 10, R.C.M. 1947, as amended

Food Stamp Program, (P.L. 88-525, 78 Stat. 703)

Commodity Distribution, (Section 1431 of Title 7, U.S. Code)

Special research and demonstration projects are authorized by

Federal statutes.

PRINCIPAL GOALS

The Department of Public Welfare is a multi-function agency whose purpose is to provide the necessities of life compatible with decency and health, and medical assistance to needy individuals who qualify and to help these people with casework services for self-care and self-support. The department also provides protective services to children and adults who are in danger of abuse or exploitation. In addition, the department helps blind and partially blind individuals to become rehabilitated to the point of earning a living for themselves and their families and to gain self-confidence and independence in daily living.

In cooperation with the U. S. Department of Agriculture, the Welfare Department encourages the proper utilization of food to raise levels of nutrition among low-income households.

PROGRAM INVENTORY AND COST SUMMARY

<u>PROGRAM</u>	COST 1969-70 F.Y.
<u>Economic Assistance:</u>	
Aid to Dependent Children.....	\$ 6,496,106
Old Age Assistance.....	2,806,559
Aid to Needy Blind.....	243,923
Aid to Disabled.....	1,961,803
Medical Assistance.....	9,856,319
Foster Care (Children).....	485,624
Day Care (Children).....	296,328
 General Relief and Contingencies.....	 24,058
 Visual Services.....	 398,371
 Determination of Eligibility.....	 2,479,323
 Social Services.....	 <u>2,236,028</u>
 TOTAL EXPENDITURES.....	 <u><u>\$27,284,442</u></u>
 Federal funds.....	 \$17,417,370
State funds.....	5,804,842
County funds.....	4,062,230

MAJOR ACCOMPLISHMENTS

ECONOMIC ASSISTANCE

A simplified method of determining eligibility has been tested and installed on a state-wide basis. This method will provide for rapid determination of eligibility for assistance applicants and expeditious delivery of their assistance checks.

The food stamp and commodity distribution programs were expanded to state-wide coverage. The number of persons participating in the food stamp program increased from 6,154 in July 1969 to 20,971 in June 1970. The total value of coupons issued during the year was \$3,322,683 of which \$1,725,834 represented the value of bonus coupons.

The department up-dated its standards of assistance effective July 1, 1969. However, because of insufficient funds, assistance is paid at only 88% of the up-dated standard. During the winter months a special allowance for winter needs is added to assistance grants to help people during the time of year when they need it the most.

During the reported year a monthly average of 21,594 individuals received assistance. 11,838 applications were received, and of those disposed of, 9,783 were approved for assistance and 1,857 were denied. During the year, 7,303 cases were closed and removed from assistance for a variety of reasons including employment, support by absent parents, return of or re-marriage of the parent, receipt of other benefits or income, death of the recipient, and reasons relating to technical eligibility.

During the year approximately 450 nursing home patients

MAJOR ACCOMPLISHMENTS

were reclassified to intermediate care at a savings of \$1.50 per day per case.

Local peer review committees of medical and optometric practitioners were established to review costs and medical services in the medical assistance program. Seventeen utilization review committees were formed to evaluate patient care in nursing homes throughout the state and 75 hospital utilization review committees were started. An advisory council of dentists from the Montana Dental Association was formed and met under the direction of the dental consultant. The dental program was revised and the scope of services more clearly defined.

Guidelines consistent with the interstate highway safety act outlining quality of ambulance service throughout the state have been developed.

We have developed a uniform costs system and guidelines on allowable costs to provide a basis for "reasonable cost reimbursement" for skilled nursing care throughout the state.

We have begun to lay the groundwork for the development of alternatives to skilled nursing care by developing a program for adult foster care for aged individuals. This program was started with the help of a summer student in June 1970. Responsibility will be transferred to the county welfare departments by the middle of September 1970.

An average of 9,047 persons per month received some type of medical assistance during the year and an additional 427 persons per month received intermediate care.

MAJOR ACCOMPLISHMENTS

SOCIAL SERVICES

Expansion of the services program to reach more persons in the target groups. Legal services were made available to all recipients in need of such services. Established demonstration programs to increase service capabilities:

1. Group home for adolescents in cooperation with Model Cities in Lewis and Clark County;
2. Employment and training program in cooperation with the Division of Vocational Rehabilitation in a seven county area;
3. Demonstration project developed in cooperation with the University of Montana to test the effectiveness of a practitioner group method of delivery of service.

Improvement in the in-service training program for all social service staff and orientation for newly appointed staff. Workshops, and other training sessions, to up-grade practice and other training activities; development of a comprehensive service program for the young, unwed mother and the provision of day care for children of working mothers including migrant families. During the period 489 cases were closed because the family was re-united and problems involved were minimized to the point where services were no longer needed.

MAJOR ACCOMPLISHMENTS

VISUAL SERVICES

During the fiscal year this program successfully rehabilitated 69 individuals and at the end of the year the division was providing rehabilitation services to 548 people.

MAJOR RECOMMENDATIONS

PROGRAM: ECONOMIC ASSISTANCE - Public Assistance

REQUIRED IMPLEMENTATION ACTION: LEGISLATIVE

PRIORITY RATING: 1 of 1

CATEGORY: INCREASING EXISTING SERVICES

Recommendation. It is recommended that sufficient funds be provided to increase grants to the full amount of assistance standards and to provide increases in grants as the cost of living continues to rise. Our 1971-73 budget request includes an amount intended to meet the assistance standard in full.

Discussion. In order to conform to the requirements of recent federal legislation, the Department updated the standards of assistance upon which the amount of assistance grants is based. When the standards were updated it was the intention of the department to make payments to fully meet the standards, however, because of the unexpectedly sharp increase in the Aid to Dependent Children caseload, the Department has not been able to meet the assistance standard in full and at present, grants represent about 88% of the standard. As the cost of living continues to rise a further increase in assistance standards and payments will become necessary in an attempt to keep pace with such increases.

MAJOR RECOMMENDATIONS

PROGRAM: ECONOMIC ASSISTANCE - Medical Assistance

REQUIRED IMPLEMENTATION ACTION: LEGISLATION

PRIORITY RATING: 1 of 4

CATEGORY: INCREASING EXISTING SERVICES

Recommendation. The department will support legislation to extend the medical assistance program to include the medically needy. Precise estimates of funding necessary for such an extension are not possible until the conditions of eligibility are established. We are requesting information from other states which have implemented this phase of the medical assistance program to enable us to develop estimates by the time they are needed for the legislature.

Discussion. At present the medical assistance program in Montana is available only to those people who are eligible for one of the federally-aided categories of assistance or who would be eligible if they applied. However, federal matching funds are available to provide medical services to the group of people whose income is just above welfare standards--the limitation being an income 1/3 above the welfare standard. For example, in Montana the standard for a family of four is \$2700 per year. This amount plus 1/3 (\$900) results in a level of \$3600 per year as the maximum which would be allowed for eligibility under a medically needy program. Because

MAJOR RECOMMENDATIONS

up-to-date data on income are not available, it is very difficult to develop meaningful estimates of the number of persons such a program would benefit and its cost. From the experience of other states, however, it appears that there is a wide range of possibilities depending upon the limitations placed on eligibility.

MAJOR RECOMMENDATIONS

PROGRAM: ECONOMIC ASSISTANCE - Medical Assistance

REQUIRED IMPLEMENTATION ACTION: LEGISLATIVE

PRIORITY RATING: 2 of 4

CATEGORY: ADDING NEW SERVICES

Recommendation. The Department will support legislation to provide medical assistance payments to recipients in public institutions. The estimated cost of such expansion is approximately \$4,500,000 per year of which \$3,000,000 would be federal funds and the remaining one and one-half million in state funds.

Discussion. Although federal funds have been available for this purpose for a number of years, the State of Montana has not taken advantage of this funding. With comparatively little upgrading of their standards, the medical portions of the institutions at Warm Springs, Boulder, Galen, Twin Bridges, and Lewistown would qualify for medical assistance payments. The payments which the institutions receive from this department would be credited to the institutions or to the general fund.

MAJOR RECOMMENDATIONS

PROGRAM: ECONOMIC ASSISTANCE - Medical Assistance

REQUIRED IMPLEMENTATION ACTION: LEGISLATIVE AND BOARD ACTION

PRIORITY RATING: 3 of 4

CATEGORY: INCREASING EXISTING SERVICES

Recommendation. An additional \$50,000 per year in state funds should be appropriated to enable the department to remove or raise the maximums which now exist on hospitalization and prescription drugs.

Discussion. Hospitalization under the medical assistance program is now limited to fourteen (14) days which is adequate for most cases of hospitalization. In a few cases, however, more than fourteen days is required and the burden of paying for additional days falls on the county departments. The same is true with respect to the \$15.00 per month maximum allowance for prescription drugs. The department believes that if these maximums are increased or removed adequate management controls can be instituted to prevent abuse of the program.

MAJOR RECOMMENDATIONS

PROGRAM: ECONOMIC ASSISTANCE - Medical Assistance

REQUIRED IMPLEMENTATION ACTION: BOARD ACTION

PRIORITY RATING: 4 of 4

CATEGORY: ADDING NEW SERVICES

Recommendation. It appears that the Medical Assistance Advisory Council will recommend the inclusion of podiatry services as a service offered under the Medical Assistance program. The estimated cost of such service would be \$10,000 per year of which \$2,000 would be required in state funds. Since this is a comparatively small amount we feel it can be absorbed within our budget request.

Discussion. When the Medical Assistance program was inaugurated, podiatry services were not included, but in recent months it has become clear that certain recipients of assistance, particularly the aged, who frequently have trouble with their feet, would be helped by such services to improve their daily living or to enable them to become self-supporting.

MAJOR RECOMMENDATIONS

PROGRAM: SOCIAL SERVICES

REQUIRED IMPLEMENTATION ACTION: EXECUTIVE

PRIORITY RATING: 1 of 4

CATEGORY: INCREASING EXISTING SERVICES

Recommendation. The department should provide additional supplemental services such as homemaker services to enable more aged and handicapped individuals to remain in their own homes. Precise cost estimates are not available.

Discussion. We believe that by increasing the capability for this service we would be able to keep more disabled and older adults in their own homes rather than having them cared for in rest homes, convalescent homes, and intermediate care homes. The basis for this is that people are happier in their familiar surroundings and it can be shown that it costs less money.

MAJOR RECOMMENDATIONS

PROGRAM: SOCIAL SERVICES

REQUIRED IMPLEMENTATION ACTION: BOARD ACTION

PRIORITY RATING: 2 of 4

CATEGORY: INCREASING EXISTING SERVICES

Recommendation. Our budget request includes an amount to be used to upgrade and expand day care facilities for the care of children.

Discussion. We have a continuing responsibility to help day care operators in all facilities to improve their program for the physical, emotional and intellectual well being of the children within the program. We have counseled with these operators on a continuing basis. There is much to be done for children who receive day care in their own homes. Many of these mothers need help in buying, in housekeeping, and in child rearing and development. It is anticipated that with the legislation pending in Congress at this time, if passed, there will be a considerable increase in the number of mothers with school-aged children and children under the age of six who will be required to enter the labor market. This will mean effort on our part and on the part of others to increase the number of facilities available.

MAJOR RECOMMENDATIONS

PROGRAM: SOCIAL SERVICES

REQUIRED IMPLEMENTATION ACTION: LEGISLATION

PRIORITY RATING: 3 of 4

CATEGORY: ADDING NEW SERVICES

Recommendation. That the department be provided additional funding to develop small group homes for adolescents. It is estimated that an additional \$20,000 per year in state funds would be needed to pay for the care of sixteen (16) adolescents in two group homes, one to be located in the southeastern part of the state and the other in the central part of the state.

Discussion. It is known that teenagers in foster care do not, in most instances, invest themselves emotionally with the foster parents, therefore, there is a high incidence of breakdown in adolescent foster boarding care. We believe this is damaging to these children and we do know from other experience that when they are placed in a setting with other teenagers and are not expected to invest themselves emotionally, the stability increases greatly.

MAJOR RECOMMENDATIONS

PROGRAM: SOCIAL SERVICES

REQUIRED IMPLEMENTATION ACTION: LEGISLATIVE

PRIORITY RATING: 4 of 4

CATEGORY: GREATER AUTHORITY

Recommendation. The department will support legislation to control black and gray market adoptions.

Discussion. Reports from the field indicate that the activity is on the increase and we do have an obligation under the existing licensing law for child placing agencies to attempt to control this. We have found that this law apparently is so worded that it is not applicable to anyone except those who set themselves up as child placing agencies. Independent operators can enter the field and take children for placement apparently without any deterrents. This practice increases our work because many of these homes are not properly studied and children and parents are disappointed by a breakdown in the adoption. Very often, this agency has to pick up the child at this point.

MAJOR RECOMMENDATIONS

PROGRAM: VISUAL SERVICES

REQUIRED IMPLEMENTATION ACTION: LEGISLATIVE AND EXECUTIVE

PRIORITY RATING: 1 of 1

CATEGORY: EXPANDING EXISTING SERVICES

Recommendation. The budget for this program includes an amount to expand into new areas where it is known that the needs of the blind and visually handicapped people are not yet being met. These needs are being studied and an effort is being made to establish priorities with the realization that during any one given period of time the program can be fully expanded to meet the needs of all who are blind, who are disabled and blind or are partially sighted.

Discussion. Adult services are needed to the multiple handicapped and blind such as blind and retarded residents of the Boulder River School. Another special group is that of the elderly blind who are residing in rest homes or retirement homes. Because of having been blinded in later life these individuals require special services which include, in many instances, orientation-mobility.

ANALYSIS OF PROGRAMS

ECONOMIC ASSISTANCE - Public Assistance

Services Provided. The Division of Public Assistance is responsible for the supervision of county departments and the determination of eligibility for the following programs:

General Assistance, Old Age Assistance, Aid to the Disabled, Aid to Dependent Children, Aid to the Needy Blind, Surplus Commodity Program, Food Stamp Program and Medical Assistance.

Objectives. The goal is to provide a state-wide uniform system of determining eligibility. Other objectives are to provide equal treatment to persons in similar circumstances in determining eligibility and to provide them with a money payment as quickly as possible, if they are found eligible.

Target Groups. All Montana people who do not have sufficient income for subsistence at a level of decency and health in accordance with the Department's standards of assistance.

Achievements. The Food Stamp Program has been expanded so that every county in the state will have a food stamp program or a commodity distribution program. In July 1969, there were 12 counties participating in the food stamp program and 4 participating in the Commodity Program. The Indian reservations are included outside of the number of counties mentioned above, under tribal agreement, for the distribution of commodities.

A simplified method of determination of eligibility was

ANALYSIS OF PROGRAMS

pretested and is now in use to provide recipients with a more rapid and expeditious method of payment.

Standards of assistance were updated effective July 1, 1969; however, because of insufficient funds, assistance can be paid only at about 88% of the updated standards.

This year we also provided recipients of assistance with a special winter allowance from October through March.

Cost and Performance Summary.

<u>Program</u>	<u>Fiscal Year--1969-70</u>
Old Age Assistance.....	\$2,806,559
Aid to Dependent Children.....	6,496,106
Aid to Needy Blind.....	243,923
Aid to Disabled.....	1,961,803
General Assistance.....	580,575

ANALYSIS OF PROGRAMS

ECONOMIC ASSISTANCE - Medical Assistance

Services Provided. The goals of the Division of Medical Assistance are to promote a healthy population, to prevent illness and premature death and to correct or limit disability. The recipient has freedom of choice of practitioners and may be treated for any illness. The program is designed to provide maximum rehabilitation for all persons with impairments. Services available under the medical program are physician services, hospital care (inpatient and outpatient), diagnostic services (laboratory and x-ray) nursing home care, prescribed drugs, dental care, eye care, prosthetic appliances, transportation, home health services and special services of physical, occupational and speech therapy. It is necessary to coordinate the payment for medical care with intensified social services focused on the proper utilization of these services, thus enabling recipients to attain their maximum independence.

In addition to the Medical Assistance program, the Division also has the responsibility for making the medical and social determination regarding eligibility for Aid to the Permanently and Totally Disabled. One physician provides part-time consultant services in this area and works with a medical social worker to determine permanent and total disability. Approximately 200 cases are evaluated each month.

Also, the Division has responsibility for the intermediate care program. This provides long-term care for persons in need of care but who do not require the services of a nurse on a

ANALYSIS OF PROGRAMS

24-hour basis. This program was implemented on September 15, 1969.

Objectives. Steps will be taken to further improve patient classifications in nursing homes and to develop alternatives for skilled nursing care to bring the skilled nursing care program more in line with the national picture. Greater efforts will be made to obtain maximum benefits from Medicare for recipients over 65 who are covered under the "buy-in". We will continue our efforts to control costs through proper utilization of medical services and cost analysis so that we will have adequate funds to continue the program throughout the 1971 fiscal year. It is anticipated that there will be adequate resources to provide for the scope of medical services as outlined during this period.

Valuable information will be gained from the two Model City pilot projects to provide care to the medically indigent individuals who have income above the assistance level.

We will coordinate our efforts with other state agencies to eliminate duplication and gain uniformity in reimbursement for medical services by all agencies throughout the state.

Target Groups. This program is available to all persons eligible for assistance under one of the federally-aided categories, and to children in foster care.

Achievements. Approximately 450 recipients were removed from the skilled nursing care program with a savings of \$1.50 per day per case. These patients had been over-classified and found not to be in need of 24-hour skilled nursing care.

ANALYSIS OF PROGRAMS

A good deal of time was spent in establishing "peer review committees" in the regional and local chapters of the Montana Medical Association. Peer review committees also were started under the Optometric Association to review costs and medical services provided under the program.

An advisory council of dentists from the Montana Dental Association was provided and met under the direction of the Dental Consultant. The dental program was revised and the scope of services more clearly defined so that the practitioners could more readily identify those services which would be paid for under the program.

Seventeen utilization review committees were formed to evaluate patient care in nursing homes throughout the state. Seventy-five hospital utilization review committees were started to evaluate patient care in these institutions throughout the state.

Guidelines to outline the quality of ambulance services throughout the state have been developed. These guidelines are consistent with the interstate highway safety act. Better quality of ambulance service is rapidly becoming available.

We have developed a uniform cost system and guidelines on allowable costs to provide a basis for "reasonable cost reimbursement" for skilled nursing care throughout the state. This has enabled us to provide a higher quality of care for less money, and we have more adequate control over the ever increasing cost of skilled nursing services purchased under the program.

ANALYSIS OF PROGRAMS

During this time we were able to lay the groundwork for the development of alternatives to skilled nursing care by developing a format for a program of adult foster care for aged individuals. This program was started with the help of a summer student in June 1970. Main responsibility will be transferred to the county welfare departments by the middle of September.

Cost and Performance Summary. During the fiscal year approximately 22,000 recipients received needed medical services in the amount of \$9,662,458 of which \$941,448 was for Intermediate Care. Medical expenditures for assistance categories by ages were as follows:

OAA (65 and over).....	\$4,058,622
ANB and AD (18-64).....	1,920,458
ADC Adults (21-64).....	1,415,679
ADC Children (0-21).....	1,215,303
Foster Children (0-21).....	110,948

ANALYSIS OF PROGRAMS

SOCIAL SERVICES - Adult Services

Services Provided. Public social services which are directed toward achieving to the extent possible social rehabilitation, self-care and economic independence for each individual and family. Services are provided to the individual to develop his capacity for personal and economic independence and to carry his appropriate family responsibility, enable him to utilize his own, family and community resources to meet his needs and maintain his sense of dignity and worth. Services are provided to protect the welfare of the client who is unable to act for himself or when his right to act for himself has been abridged by competent judicial authority.

Objectives. Provide protective services for aged and disabled individuals in need of protection because of physical or mental limitations which cause them to be unable to act in their own behalf, are seriously limited in the management of their affairs, are neglected or exploited or are living in unsafe or hazardous conditions.

Provide essential services to enable aged and disabled individuals to remain in or return to their own homes and communities and avoid any unnecessary placement in institutions.

Provide services to maximize the potential for self-care for aged, sick, blind or disabled individuals.

Minimize the effects of isolation or estrangement from family and community.

ANALYSIS OF PROGRAMS

Provide services designed to realize potential for total or partial self-support when age, physical condition and home responsibilities of the adult are such that there is potential for training or employment.

Provide and coordinate supplemental care services such as home health care, volunteer and homemaker services to maintain aged, ill or disabled individuals in their own home when medically feasible.

Plan or assist in planning for shelter care when the client is unable to remain in his own home because of physical or mental incapacity.

Recruit and supervise foster homes for aged and disabled individuals who cannot remain in their own home but are not in need of nursing home or hospital care.

Provide services around money management when the client is not functioning in this area and provide for protective payments if it appears that this is necessary for the protection of the individual.

Ensure that aged and disabled individuals receive medical and social services designed to help these people remain in their own homes, or to assist them to return to their own homes and be a part of the community.

Arrange research in the areas of weighted caseloads and careful study of selected samples of cases to determine the quality and quantity of the service program.

ANALYSIS OF PROGRAMS

Target Groups. Recipients of old age assistance, medical assistance for the aged, aid to the needy blind and aid to the disabled who are in need of and apply for any services offered by the Division of Social Services.

Any client in the above-named categories who is found in need of protective services but is unable or unwilling to make voluntary application.

Achievements. In the adult service categories, one-third of the caseload is considered service cases at any given time. This means approximately 2,000 individuals receive one or more services under this program each month.

Protective services are provided for 554 individuals who are in need of these services because of physical or mental impairments which cause them to be unable to act in their own behalf.

Casework, homemaker, and other indicated services are provided on ongoing basis to over 200 individuals to enable them to remain in their own homes.

Ninety individuals have been returned to their own homes from institutional care in a year's time through supportive services to make community living possible.

Legal services were provided for 77 individuals in the adult categories in the March, April, May quarter.

Casework and homemaker service to improve home conditions and financial management were provided to 491 individuals.

ANALYSIS OF PROGRAMS

Services to meet socialization and recreational needs, including volunteer programs in the four most populous counties, reached 101 individuals.

Services related to personal and family needs reached 150 individuals.

Department of Public Welfare has recently initiated a joint project with Vocational Rehabilitation to demonstrate the effectiveness of a team approach in the determination of training and employment plans for ADC, AD and GA clients in a seven-county area in northern Montana. Since this project was recently funded, results will be measurable in the next fiscal year.

While services for adults need to be expanded to meet the needs of a greater proportion of the target group, it is felt that social services have been effective in helping elderly persons to remain in their own homes whenever possible and keep them active and interested in community life. When shelter care is necessary because of physical or mental problems, the social worker helps to determine the shelter care facility which will best meet the client's needs. Of primary importance is the function of the department in protecting the aged person who is unable to act in his own behalf and may be subject to hazardous living conditions, inadequate health care and exploitation by unscrupulous persons.

Cooperation with Vocational Rehabilitation, Employment Service, and community-based programs to employ the aged and

ANALYSIS OF PROGRAMS

handicapped has resulted in full or partial self-sufficiency for many persons and it is anticipated that the demonstration project described above will establish that many more people can enter the labor market when a concentration of social, rehabilitative, medical and community services can be utilized.

Cost and Performance Summary. The following data is presented in summary form. Additional supporting data is available upon request.

PERFORMANCE:	. . . FISCAL YEARS		
	1969-70	1970-71	1971-72
Casework Services	1117	1170	1230
Protective Service	498	608	718
Self-care	176	264	352
Return from Institution	90	90	90
Legal Services	77	84	93
Housing and Money Management	766	817	868
Personal and Family Problems	210	390	579
Self-support	115	126	137

ANALYSIS OF PROGRAMS

SOCIAL SERVICES - Family and Children Services

Services Provided. Public social services directed toward helping a family or individual in one or more areas of function (e.g. economic, personal, family and social) for the purpose of rehabilitating, reuniting, or strengthening the family.

Objectives. Sustain and strengthen parents in the parental role and maintain what a child required for physical, emotional, intellectual, spiritual and social development.

Prevent, correct, modify or alleviate specific causes of social dysfunctioning or obstacles to the child's development, and to avoid unnecessary separation of the child from his family.

Provide supportive and referral services for all members of the family with immediate or longer range potentials for employment and self-sufficiency.

Strengthen child care services for children whose mothers are in educational or job training programs, or who are working outside of their own homes.

Recruit and train volunteers and para-professionals to care for children in their own homes and children who must be out of their own homes part of each day.

Strengthen family life through assisting and preventing where possible births out of wedlock and provide family planning services for families who need and want such service.

Provide casework, homemaker and related services to improve

ANALYSIS OF PROGRAMS

functioning in child rearing, money management, housing and housekeeping.

Make available legal services for families in need of such services.

Assist clients in establishing paternity and securing support payments from absent parents.

Provide foster care for Indian children on reservations who are eligible for Aid to Dependent Children payments at time of court action.

Encourage those who are qualified to go on to graduate school for advanced study to improve their knowledge and skill in implementing a social service program.

Target Groups. All current, past and potential recipients of aid to dependent children who are in need of, and apply for, any services offered by the Division of Social Services.

Working mothers and mothers in training whose income is limited to the point where they are unable to provide suitable child care for their children.

Indian children on reservations who are placed in the custody of the Department of Public Welfare and are eligible for Aid to Dependent Children payments at the time the custody action is initiated.

Achievements. Services offered and one or more services provided for the approximately 4,000 families receiving Aid to Dependent Children money payments.

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Family planning services in cooperation with the medical assistance program, estimated to be reaching 30 to 40 percent of the Aid to Dependent Children caseload.

Approximately 200 cases closed as a result of services geared to reuniting families.

Results of work incentive program and referrals to other manpower programs:

Cases assessed.....	1,086
Cases referred.....	797
Completed training.....	61
Follow-up.....	84
Grant closed.....	41
Grant reduced.....	20
Referrals to manpower....	226

Basic education and high school equivalency referrals for under-educated clients resulted in approximately 250 individuals entering these programs.

Day care was provided for 423 children, 259 of whom are children of mothers in the work incentive program. An additional 148 children received Aid to Dependent Children related day care, which is provided for working mothers and mothers in training having limited incomes.

Homemaker service provided for 152 families representing 502 children monthly.

Legal services provided for 446 cases representing 1,625 welfare recipients during the March, April, May quarter. Legal

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services around family problems included 111 divorces or annulments, 7 separations, 38 non-support, 58 custody and guardianship, 13 paternity and 10 adoption cases.

Paternity and support actions have been initiated for 21 cases referred within the state and 22 cases referred from other states.

Cooperative agreement reached with the Bureau of Indian Affairs for orderly transfer of children on reservations eligible for the Aid to Dependent Children-foster care program, to be initiated July 1, 1970.

Meetings with staff, field reports and research projects indicate that services being provided are effective in improving family living, upgrading housing and housekeeping and dealing with special problems. Planning around training and employment is a service goal in close to 50 percent of the Aid to Dependent Children cases, but problems on the other end, availability of job placements, have placed some limits on utilization. The high utilization of the day care program by working mothers indicates that this is an effective preventive measure, enabling the mother who might otherwise find it necessary to apply for Aid to Dependent Children to remain in the labor market.

Another area of high utilization, the legal services program, has been effective in resolving family legal problems, particularly in obtaining divorces and annulments for clients who have been prevented from remarrying, and clarifying the legal status of and obtaining support for minor children.

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These specific kinds of goals plus the overall program goals of casework, homemaker and related services to improve family living and maintain family stability provide for better functioning and improved self-image for the person in deprived circumstances and a healthier environment for growing children. It means greater utilization of educational and employability programs, greater community involvement and ultimately more productive, responsible citizens in both the present and future generations.

Cost and Performance Summary. The following data is presented in summary form. Additional supporting data is available upon request.

PERFORMANCE	 FISCAL YEARS		
	1969-70	1970-71	1971-72
Casework Services	4247	4923	5600
Homemaker Services	152	227	337
Legal Services	NA	446	491
Day Care	422	562	716
WIN - Manpower	797	996	1245
Basic Education - GED	250	350	450

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SOCIAL SERVICES - Child Welfare Services

Services Provided. Public social services which supplement, or substitute for, parental care and supervision for the purpose of:

Preventing or remedying, or assisting in the solution of problems which may result in the neglect, abuse, exploitation or delinquency of children.

Protecting and caring for homeless, dependent or neglected children.

Protecting and promoting the welfare of children of working mothers.

Safeguarding the welfare of children born out of wedlock and assisting unmarried parents.

Providing for adequate care of children away from their own homes on a full or part-time basis.

Establishing standards and licensing facilities for care of such children.

Objectives. To keep as many children as possible in their own homes with their own parents or others acting in the role of substitute parents.

To secure children in facilities outside of their own homes on a temporary or permanent basis where the reasons for removal are urgent and compelling.

To work cooperatively with the courts of the state in the process of protecting children.

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To develop and improve standards for facilities necessary to the temporary or permanent care of children outside of their own homes.

To develop an effective referral system for neglected and dependent children on our Indian reservations.

To recruit and train volunteers and para-professionals to care for children in their own homes and children who must be out of their own homes part of each day.

Provide comprehensive services to unmarried parents to meet present needs, prevent further out-of-wedlock pregnancies and assist in planning for the child.

To follow up fathers who are separated from their families and do not support them.

Target Groups. Children whose needs for healthy, physical and personality growth are not being met within the family group. Specifically, this includes one or more of the following; Obvious neglect, abuse, cruelty, deprivation of good care comparable to the culture and community in which the child lives or will live, or failure on the part of parent or parents to meet the ordinary legal and social responsibilities required of the parents.

The child temporarily or permanently without a home; specifically the abandoned, deserted and rejected child.

The unmarried mother and her child.

Children in danger of becoming delinquent as supported by referrals from courts and law enforcement agencies.

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Children who are in need of temporary care outside of their own homes.

Children in need of permanent placement, e.g., adoption.

Non-resident children living within the state and resident children living out of the state on which interstate agreements have been completed or are pending.

Children awaiting admission to the state children's institutions, for example, the Boulder River School and Hospital at Boulder, Montana.

Children for whom district judges request child welfare services, particularly adoptive studies on independent placement.

Achievements. Child welfare services are provided for 2,299 children representing an increase of 300 children served in a period of one year.

Foster family care is provided for 609 children, an increase of 30 children during the one-year period. Institutional care is provided for 168 children and unwed mothers, a decrease of 25 institutional placements in a year's time. A demonstration project in conjunction with Helena Model Cities is planned and funded to establish the need for and effectiveness of group home placement for dependent, neglected and predelinquent adolescents.

During the year 1969, 265 children were placed for adoption including 75 children who would be considered hard to place. As of March 31, 1970, 118 children were in approved adoptive homes on a trial basis.

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Casework service was provided for 559 unwed mothers, with the following age breakdown:

Over 21.....239

18 - 21.....230

Under 18..... 90

A new program for purchase of service at the Florence Crittenton Home was inaugurated in May. This program is geared to provide a total service to this client group, particularly the adolescent, including casework service, family planning, continuing education, for girls in school and vocational planning for girls completing high school.

Protective service is provided in cooperation with the courts for children 16 and under who are in danger of, or subject to, neglect, abuse, or exploitation. Under the Montana Child Abuse Law, 16 actual or suspected abuse situations were reported in 1969-70. Each of these cases received intensive services and, except in rare instances where abuse was not established, were brought to the attention of the court.

The Department of Public Welfare acts as guardian to protect the funds of children in custody who have Indian monies, OASDI or veteran's benefits.

In a period of one year, 446 cases were closed because the family problem was resolved or minimized to the point where services were no longer needed. Forty-three children were returned to their own homes from foster care situations.

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Social Services Division establishes standards for licensing and licenses all private child caring and child placing agencies. There are presently three private child placing agencies licensed. Six voluntary child caring institutions with an aggregate capacity for 312 children are licensed. There are 604 licensed foster family homes, with an aggregate capacity for 1,215 children and one independent group home with a capacity for 12 children. There is one licensed maternity home with capacity for 32 unwed mothers. There are 489 family day care homes with a capacity for 1,074 children and 33 day care centers with a capacity for 990 children, currently licensed. In a one-year period, placement capability has increased by 110 available resources for foster care and 735 available resources for day care. Placement capability has decreased by 30 in voluntary child caring institutions and remained the same in maternity home.

A program to provide day care services for preschool children of migrant workers was initiated for the summer of 1970. This program now serves 139 children.

Child welfare services has provided protection and placement when necessary for dependent, neglected, abused and exploited children brought to the attention of the agency. Services have expanded to meet the needs of more children and increased placement capability means more opportunities to select the placement in terms of the most effective plan

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for the child. The decrease in institutional placements indicates more children are being kept in the community in their own homes or foster home care.

Day care capabilities and services for the working mother are the most rapidly expanding child welfare service, providing care for the child who has had no care or inadequate care while the mother worked. Services to unwed mothers have also expanded with concentration on prevention of further pregnancies by reaching the school-aged unmarried mother with concentrated services including continuing education. Day care for children of migrant workers was initiated this year to provide care and socialization experience for a group of children who have not had this type of service previously.

Adoptable children have been successfully placed so that there is no backlog of adoptable children awaiting placement. It is felt that through the preventive and protective service programs, as many children as possible are kept in their own homes and the expanding placement programs provide better care and treatment for the child who must be separated from his own parents on a temporary or permanent basis.

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Cost and Performance Summary. The following data is presented in summary form. Additional supporting data is available upon request.

PERFORMANCE	 FISCAL YEARS		
	1969-70	1970-71	1971-72
Children Served	2,299	2,500	2,700
Preventive-Protective Service	1,089	1,381	1,933
Foster Care	609	669	735
Adoptive Placement	226	266	275
Group Care	2	3	12
Institutional Care	193	168	168
Unwed Mothers Served	364	559	660
Migrant Children - Day Care		139	139
Agencies Licensed	3	3	3
Foster Homes Licensed	604	665	798
Day Care Homes Licensed	489	683	956
Day Care Centers Licensed	33	36	40
Voluntary Institutions Licensed	6	6	6

VISUAL SERVICES

Services Provided. The Division of Visual Services of the Department of Public Welfare has the responsibility to provide Vocational Rehabilitation and other services to individuals who are blind, or who may be losing their sight, or who have partial blindness, or who have visual impairment such that it prevents the client from carrying on all most normal daily activities. To be eligible for rehabilitation services for the blind the individuals loss of sight must have reached that point which would be considered an employment handicap.

During the past fiscal year, 69 cases have been closed as rehabilitated, by the Division of Visual Services. At the present time the Division is providing rehabilitation services to 548 clients. Services provided through this program include the following: Diagnostic and evaluation; counseling and guidance; physical restoration, including surgery; hospitalization and treatment; prosthetic appliances; training and training materials, including tuition, books and supplies, training tools and equipment; reader service; maintenance; transportation; services to family members; placement; and follow-up services.

The Division also makes available to rehabilitation clients such special services as orientation mobility, which includes assisting individuals to function more independently; business enterprise supervision to assist blind persons to

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operate small business operations such as vending stands; recording textbooks on tape and supplying tape recorders for their use; provision of glasses, artificial eyes, special lenses and so forth. Other special equipment as needed, such as braille writers and other appliances.

Objectives. The goal or objective of this program is to assist blind individuals to reach the fullest possible degree of independence. Every effort is made to enable blind and partially blind clients to become employable and to be able to earn a living for themselves and their family. In other cases the goal of "Independent Living" may be the objective. The program places emphasis on assisting those blind who currently receive public assistance to ultimately reach the point of employment.

Target Groups. The program in this respect is self-explanatory, in that the target group served includes the blind and partially blind, as already described earlier in the report. Another particular area of target groups are those blind who are now on Public Assistance. A target group with which the program would like to become involved is the multiple handicapped, as for instance, those who are blind and regarded as blind and elderly.

Achievements. The Division of Visual Services has expanded greatly during the past few years. The 1969-70 fiscal year in this respect was no exception. This expansion

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was felt necessary if the agency were to provide adequate services for the increasing number of blind people who are being located in the state. New District Offices have been opened so that blind persons in all areas of the state can receive services more quickly by Counselors near their homes. The program today is serving more individuals than at any other time in its history. The provision of these services undoubtedly is bringing about the desired results of enabling more people with sight problems to become rehabilitated.

Cost and Performance Summary. The cost of rehabilitation of blind clients continues to rise from year to year. There is reason to believe that this cost may continue to increase even though the program makes every effort to utilize all possible resources which may be available in each and every case. Some of the factors bringing about this rising cost, besides the rising number of clients being served, are as follows:

1. The program at this time does not have a complete picture as to exactly how many Montanans are within the category of blindness or partially blind who need the help of this agency.
2. The cost of providing physical restoration, including surgery, treatment and hospitalization are still continuing upward in their trend. Some new methods of eye surgery and treatment have been developed during recent years but these new methods are proving

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more costly than the older methods of surgery and which were not as effective. Educational costs also continue to increase in such areas as tuition, board and room, etc.

Finally, it should be admitted that the rehabilitation of blind people is costly. Although certainly not as costly as it would be if these same individuals had to be served through Public Assistance or other welfare programs.

Financial Recap: The program of Vocational Rehabilitation for the Blind and Visually Handicapped is supported by 80% Federal funds and 20% State funds.

EXPENDITURES AND BUDGET REQUEST

1969-70.....	\$398,371
1970-71.....	423,360
1971-72.....	516,000
1972-73.....	540,000

**PROGRAM COSTS BY OBJECT OF
EXPENDITURE AND SOURCE OF FUNDING**

1969-70 FISCAL YEAR

PROGRAM	ECONOMIC ASSISTANCE	
	OBJECT OF EXPENDITURE	
	PERSONAL SERVICES	
	OPERATIONS	
	CAPITAL	
	GRANTS AND BENEFITS ..*	\$ 22,751,295
	TOTAL EXPENDED	\$ 22,751,295
	*Includes \$580,575 County General Assistance	
	SOURCE OF FUNDING	
	Federal and Private Revenue Fund	\$ 14,032,065
	General Fund	5,162,204
	County Poor Funds	3,557,026
	TOTAL EXPENDED	\$ 22,751,295

PROGRAM	ELIGIBILITY DETERMINATION (see Recap. on page 49)	
	OBJECT OF EXPENDITURE	
	PERSONAL SERVICES	
	OPERATIONS	\$ 2,479,323
	CAPITAL	
	GRANTS AND BENEFITS	
	TOTAL EXPENDED	\$ 2,479,323
	SOURCE OF FUNDING	
	Federal and Private Revenue Fund	
	General Fund	
	County Poor Funds	
	TOTAL EXPENDED	\$ 2,479,323

**PROGRAM COSTS BY OBJECT OF
EXPENDITURE AND SOURCE OF FUNDING**

1969-70 FISCAL YEAR

PROGRAM	SOCIAL SERVICES (see Recap. on page 49)	
	OBJECT OF EXPENDITURE	
	PERSONAL SERVICES	\$ 2,236,028
	OPERATIONS	
	CAPITAL	
	GRANTS AND BENEFITS	
	TOTAL EXPENDED	\$ 2,236,028
	SOURCE OF FUNDING	
	Federal and Private Revenue Fund General Fund County Poor Funds	
	TOTAL EXPENDED	\$ 2,236,028

PROGRAM	VISUAL SERVICES (see Recap. on page 49)	
	OBJECT OF EXPENDITURE	
	PERSONAL SERVICES	\$ 398,371
	OPERATIONS	
	CAPITAL	
	GRANTS AND BENEFITS	
	TOTAL EXPENDED	\$ 398,371
	SOURCE OF FUNDING	
	Federal and Private Revenue Fund General Fund (included on Recap. on page 49)	\$ 323,386 74,985
	TOTAL EXPENDED	\$ 398,371

**PROGRAM COSTS BY OBJECT OF
EXPENDITURE AND SOURCE OF FUNDING**

1969-70 FISCAL YEAR

PROGRAM	RECAP OF PERSONAL SERVICES, OPERATIONS AND CAPITAL (Includes Eligibility Determination, Social Services and Visual Services)	
	OBJECT OF EXPENDITURE	
	PERSONAL SERVICES	\$ 3,587,297
	OPERATIONS	1,506,372
	CAPITAL	20,053
	GRANTS AND BENEFITS	
	TOTAL EXPENDED	\$ 5,113,722
SOURCE OF FUNDING		
	Federal and Private Revenue Fund	\$ 3,449,773
	General Fund	577,463
	County Poor Funds	1,086,486
	TOTAL EXPENDED	\$ 5,113,722

PROGRAM		
	OBJECT OF EXPENDITURE	
	PERSONAL SERVICES	
	OPERATIONS	
	CAPITAL	
	GRANTS AND BENEFITS	
	TOTAL EXPENDED	
SOURCE OF FUNDING		
	TOTAL EXPENDED	

